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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number			
APPLICATION AS FILED - PART I (Column 1) (Column 2)						SA	SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY		
	FOR	NI MA	ER FILED	NUMB	ER EXTRA	RATE	(S)	FEE (\$)	ì	RATE (\$)	FEE (\$)	
BAS	HC FEE SFR 1.16(a), (b), or (_	N/A		NA	1	N/A			N/A		
SE	RCH FEE	_ [N/A		N/A	N/				N/A		
EX/	SFR 1.16(k), 6), or 6 LIMINATION FEE SFR 1.16(0), 60), 0r (N/A		N/A	NU	N/A			N/A		
101	AL CLAIMS OFR 1.16(1)	-	minus 20 +				-		OR	х =		
MD	EPENDENT CLA	IMS	minus 3 = *			×	2			х =		
APF FEE	CFR 1.16(N)) *LICATION SIZE *CFR 1.16(s))	sheets of is \$250 (3 additions	If the specification and drawings esheets of paper, the application sizes \$250 (\$125 for small entity) for eadditional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFR									
MUI	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1))									N/A		
٠,,	* If the difference in column 1 is less than zero, enter "0" in column 2.									TOTAL		
1	APPLICATION AS AMENDED - PART II Column 1) (Column 2) (Column 3)					SA	SMALL ENTITY			OR OTHER THAN SMALL ENTITY		
TΑ		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
Æ	Total pr CFR 1.14(1))	. 8	Minus	".20	50	x	=		OR	x 50 =		
AMENDMENT	Independent (SZ CFR 1.16(h))	٠ ع	Minus	[™] 3	60	x	=		OR	x 200 =		
ME	Application Size	Application Size Fee (37 CFR 1.16(s))										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(1))					N/A			OR	N/A		
						ADD'L	FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)									_			
ПB		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TKONAL FEE (\$)	
Ē	Total (37 CFR 1.16(1))	•	Minus	*	E	×	Ε		OR	х =		
MENDMENT	Independent (37 CFR 1.18(h))	•	Minus	***	27	x	-		OR	х =		
ME	Application Size Fee (37 CFR 1.16(s))											
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))					N/A			OR	N/A		
Γ						TOTAL ADD'L			OR	TOTAL ADO'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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